

EXPRESS MAIL NO. EV530944546US

	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			240102.402USPC		
	FY 2005 (Fees pursuant to the Consolidated Appropriatio	ns Act, 2005 (H.R.	4818).)			
	Application Number 10/519,694			Int'l Filing Date 27 June 2003		
	For HEATING DEVICE FOR A FLUID LINE AND	METHOD OF MA	NUFACTURE			
	Art Unit		Exami	Examiner		
	This is a request under the provisions of 37 CF reply in the above identified application.	R 1.136(a) to exte	end the period for fil	ing a		
	The requested extension and fee are as follows (check time period desired a fee below):			er the appropriate	е	
	Fee Sm:		Small Entity Fee	nall Entity Fee		
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$		
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ <u>450</u>		
	☐ Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$		
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$		
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$		
!	Applicant claims small entity status. See 37	7 CFR 1.27.				
	A check in the amount of the fee is enclosed.					
	 Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required 					
	or credit any overpayment, to Deposit Account Number <u>19-1090</u> . I have enclosed a					
	duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
	Low the Complicant/inventor					
	I am theapplicant/inventor.					
	☐ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).					
	X attorney or agent of record. Registration No. 35,939					
	attorney or agent under 37 CFR 1.3					
10/20/2005 ATRAN	Parietzation number if acting under		<u> </u>			
03 FC:1252	450-00-98		October 13, 2005			
	Signature	_	Date	Date		
	Lorraine Linford		206.622.	206.622.4900		
	Typed or printed name					
	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are require					

NOTE: Signatures of all the inventors or assignees of record of Submit multiple forms if more than one signature is required.

SEND YO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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